

ENCLOSURE 6  
AUGUSTA CO.



## AUGUSTA COUNTY FIRE-RESCUE

County Government Center  
18 Government Center Lane  
P.O. Box 590, Verona, VA 24482

Main Office Line: (540) 245-5624 - Fax Line: (540) 245-5356

[www.co.augusta.va.us](http://www.co.augusta.va.us)  
[firerescue@co.augusta.va.us](mailto:firerescue@co.augusta.va.us)

December 30, 2013

1005 Technology Park Drive  
Glen Allen VA 23059-4500

Dear Mr. Thompson:

Please find enclosed a burn building grant application for the County of Augusta. This application is to use grant funds to conduct a repair/renovation project to our existing burn building that was placed into service in 2008. These repairs were recommended by TSG an engineering firm contracted by VDFP to conduct five year NFPA 1403 structural inspections on burn buildings in the Commonwealth. If the grant is approved it will facilitate the repair or addition of all items identified by TSG in their report to VDFP dated July 24 2013. The report number is VA11002-BB14 and a copy is supplied for your convenience. All requested documentation is supplied on the enclosed CD. We have estimated the cost of the concrete work and signage as we are working with our engineer to determine the scope of work required to complete the repair and VDFP on proper verbiage and size of the signage so our County sign shop can give us a quote. Please do not hesitate to contact me with any questions you may have.

Sincerely,

David Weaver  
Interim Captain

Department of Fire Programs

JAN 03 2013

Administration

JAN 03 2013



Commonwealth of Virginia  
Department of Fire Programs

ADMINISTRATION

## ATTACHMENT A

**Burn Building Grant Application**  
**Construction, Renovation, or Repair**

<b>A. Applicant Information</b>	
1. Title of Jurisdiction Making Application (Check <input checked="" type="checkbox"/> only one, then make entry)	<input checked="" type="checkbox"/> County of <u>Augusta</u> <input type="checkbox"/> City of _____ <input type="checkbox"/> Incorporated Town of _____
2. Employer Identification Number (EIN)	<div style="border: 1px solid black; padding: 2px;">           5 4 <span style="background-color: black; color: black;">XXXX</span> 6 0 0 1 1 3 1         </div>
3. Principal Point of Contact	(Include salutation, name & title.) <b>Lieutenant David Weaver</b>
4. Mailing Address (Include zip code+4)  Identify <b>COUNTY</b> if appropriate →	<b>PO Box 590</b> <b>Verona, VA 24482-0590</b> <b>Augusta</b>
5. Telephone Number	( 540 245-5624
6. FAX Number	( 540 245-5356
7. Internet e-mail address	dweaver@co.augusta.va.us
8. Application Scope (Check <input checked="" type="checkbox"/> only one)	<input checked="" type="checkbox"/> <b>Sole Jurisdiction as identified in [A]</b> <input type="checkbox"/> <b>Multiple Jurisdictions - Complete [F]</b>

<b>B. Facility Information</b> (Burn Building)	The term "burn building" refers to an unoccupied structure. The purpose of the Burn Building is to provide live fire training to fire service personnel in support of Fire Fighter I and Fire Fighter II Training throughout the Commonwealth of Virginia.
1. Current / Proposed <b>Owner</b> of Facility	(Party holding /to hold title to the property) <b>County of Augusta</b>
2. In-Service Date or Age of Structure	(Leave blank if NOT an existing structure as reported in [C1] below.) Date <u>04/01/08</u> <input type="checkbox"/> Unknown If unknown, enter approximate age in years
3. Address of Structure (If appropriate, identify <b>COUNTY</b> where located.)	<u>180 Technology Dr.</u> <u>Staunton, VA 24401-3575</u> <u>Augusta</u>
4. Will the renovation or repair bring the the burn building into compliance with the current standard of NFPA 1403, including appropriate NFPA 1403 signage? If no, explain in 6. Comments.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5. Will the construction of the burn building be in compliance with the current edition of Sections I through IV of the Summary of Burn Building Prop Grant Program as included in the VDFP Project Manual for Burn Building Props and the current standard of NFPA 1403? If no, explain in 6. Comments.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
6. Comments (pertaining to Facility)	<input type="checkbox"/> None Project is renovation and repair to existing facility so question 5 does not apply. This project will bring the building into compliance with all recommendations made by TSG during it's 5 year inspection per VDFP Report # VA11002-BB14

JAN 03 2013

C. Facility Usage																																			
<b>1. Number of annual burns</b> (must be documented)  (for New construction, this figure is projected)	VDFP FFI burns <span style="float: right;">Administration <input type="text" value="5"/></span> (In compliance with NFPA 1403 standards)  VDFP FFII burns <span style="float: right;"><input type="text" value="2"/></span> (In compliance with NFPA 1403 standards)  Other Burns <span style="float: right;"><input type="text" value="5"/></span> (specify types of burns)																																		
<b>2. Travel to another facility</b>	Distance traveled to closest alternate facility <span style="float: right;"><input type="text" value="19.57"/></span> (In miles)  Time traveled to closest alternate facility <span style="float: right;"><input type="text" value="22"/></span> (rounded to whole hours)																																		
<b>3. Other localities served</b> (list number of stations and number of firefighters served for each locality)  (for New construction, this figure is projected)  (if more than 5 localities are served, additional localities must be included on Additional Localities Served tab)	<table border="0"> <tr> <td colspan="2">Name of Locality <input type="text" value="City of Staunton"/></td> </tr> <tr> <td>Number of stations</td> <td><input type="text" value="2"/></td> </tr> <tr> <td>Number of Firefighters</td> <td><input type="text" value="30"/></td> </tr> <tr> <td colspan="2">Name of Locality <input type="text" value="City of Waynesboro"/></td> </tr> <tr> <td>Number of stations</td> <td><input type="text" value="1"/></td> </tr> <tr> <td>Number of Firefighters</td> <td><input type="text" value="32"/></td> </tr> <tr> <td colspan="2">Name of Locality <input type="text" value="County of Augusta"/></td> </tr> <tr> <td>Number of stations</td> <td><input type="text" value="22"/></td> </tr> <tr> <td>Number of Firefighters</td> <td><input type="text" value="535"/></td> </tr> <tr> <td colspan="2">Name of Locality <input type="text" value="Wintergreen FD"/></td> </tr> <tr> <td>Number of stations</td> <td><input type="text" value="3"/></td> </tr> <tr> <td>Number of Firefighters</td> <td><input type="text" value="48"/></td> </tr> <tr> <td colspan="2">Name of Locality <input type="text"/></td> </tr> <tr> <td>Number of stations</td> <td><input type="text"/></td> </tr> <tr> <td>Number of Firefighters</td> <td><input type="text"/></td> </tr> <tr> <td colspan="2"> <b>TOTAL NUMBER OF STATIONS SERVED</b> (from above and add') <span style="float: right;"><input type="text" value="28"/></span> </td> </tr> <tr> <td colspan="2"> <b>TOTAL NUMBER OF FIREFIGHTERS SERVED</b> (from above and add') <span style="float: right;"><input type="text" value="645"/></span> </td> </tr> </table>	Name of Locality <input type="text" value="City of Staunton"/>		Number of stations	<input type="text" value="2"/>	Number of Firefighters	<input type="text" value="30"/>	Name of Locality <input type="text" value="City of Waynesboro"/>		Number of stations	<input type="text" value="1"/>	Number of Firefighters	<input type="text" value="32"/>	Name of Locality <input type="text" value="County of Augusta"/>		Number of stations	<input type="text" value="22"/>	Number of Firefighters	<input type="text" value="535"/>	Name of Locality <input type="text" value="Wintergreen FD"/>		Number of stations	<input type="text" value="3"/>	Number of Firefighters	<input type="text" value="48"/>	Name of Locality <input type="text"/>		Number of stations	<input type="text"/>	Number of Firefighters	<input type="text"/>	<b>TOTAL NUMBER OF STATIONS SERVED</b> (from above and add') <span style="float: right;"><input type="text" value="28"/></span>		<b>TOTAL NUMBER OF FIREFIGHTERS SERVED</b> (from above and add') <span style="float: right;"><input type="text" value="645"/></span>	
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<b>4. Maintenance of facility</b>  (for New construction, skip Section C.4. Section E.2. MUST be completed)	Annual Maintenance Inspections <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (documentation of annual inspections MUST be provided with application for inspections conducted after 12/2007)  Previous Repair Projects <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (documentation MUST be provided with application for most recent repairs)																																		

D. Project Description							
1. Level of work proposed (Check <input checked="" type="checkbox"/> only one)	<input type="checkbox"/> NEW Construction where no such structure previously existed <input checked="" type="checkbox"/> RENOVAION of an existing burn building or substantially similar structure <input checked="" type="checkbox"/> REPAIR of an existing burn building (up to \$10,000)						
2. Type of Building (proposed or existing)	<table border="0"> <tr> <td><input type="checkbox"/> Class A fuel</td> <td><input type="checkbox"/> Prototype I plans (brick, block, concrete)</td> </tr> <tr> <td><input checked="" type="checkbox"/> Class B fuel</td> <td><input checked="" type="checkbox"/> Prototype II plans (steel frame)</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other*</td> </tr> </table> <div style="border: 1px solid black; display: inline-block; padding: 2px;">2,596</div> Square Footage of Building (proposed or existing)  <div style="border: 1px solid black; display: inline-block; padding: 2px;">2</div> Number of Burn Rooms on 1st floor <div style="border: 1px solid black; display: inline-block; padding: 2px;">1</div> Number of Burn Rooms on 2nd floor  <b>For New Construction:</b> *If building plans deviate from Prototype I or II, applicant <b>MUST</b> define building concept and include proposed plans with application.  <b>For Renovations or Repairs:</b> *If building plans deviate from Prototype I or II, applicant <b>MUST</b> include copy of existing building plans with proposed renovations/repairs.	<input type="checkbox"/> Class A fuel	<input type="checkbox"/> Prototype I plans (brick, block, concrete)	<input checked="" type="checkbox"/> Class B fuel	<input checked="" type="checkbox"/> Prototype II plans (steel frame)		<input type="checkbox"/> Other*
<input type="checkbox"/> Class A fuel	<input type="checkbox"/> Prototype I plans (brick, block, concrete)						
<input checked="" type="checkbox"/> Class B fuel	<input checked="" type="checkbox"/> Prototype II plans (steel frame)						
	<input type="checkbox"/> Other*						
3. Architectural and/or Engineering (A/E) (Check <input checked="" type="checkbox"/> only one for each)	Has an A/E study already been completed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable If so, is a copy attached to this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable						
4. Condemnation and/or fitness for use  (Leave [C4] blank if this application is for totally new construction; otherwise Check <input checked="" type="checkbox"/> only one for each statement.)	Is this structure still in use for certification of FFI and FFII at the time of application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, is there currently a scheduled date to remove the structure from service? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter the month & year: 9/30/2014 If not presently in service, has this structure been <u>condemned</u> by a building official or other such entity legally empowered to do so? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable If yes, is a copy of such order attached to this application? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable						

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<b>E. Financial Plan</b>		An estimated project budget must be attached to this application. For renovation/repair projects, contractor estimates must be attached.	
<b>1. Project Budget (Capital Expend)</b>			
<b>a. Expense</b>			
i. Estimated Cost of Construction (Enter or check <input checked="" type="checkbox"/> )	\$ 96,400.00	<input type="checkbox"/>	Unknown at time of application
ii. Estimated A/E Costs (Enter or check <input checked="" type="checkbox"/> )	\$ -	<input type="checkbox"/>	Unknown at time of application
iii. Estimated Total Costs (Enter or check <input checked="" type="checkbox"/> )	\$ 96,400.00	<input type="checkbox"/>	Unknown at time of application
<b>b. Revenue</b>			
i. Grant Funding Being Requested New construction maximum \$430,000	\$ 96,400.00		
ii. Matching / Cost Share Funds	\$ -		
iii. Source of Matching Funds (local contributions, donations, etc.)			
<b>2. Operating Budget (Maint. Expend)</b>			
a. Is there a financial agreement among partnering localities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not Applicable
b. Is there a local budget for annual maintenance costs?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
c. Is there a local budget for annual inspection costs?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
d. Is there a local budget for 5-year inspection costs?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

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<b>F. Additional Parties of Interest</b>  (Mark N/A and skip section [D] if not applicable - see [A.8])	Identify hereunder ALL jurisdictions (Not their Departments) otherwise participating in the proposed project. Attach additional sheets as may be required.
<b>1. NON-Applicability</b>	<input checked="" type="checkbox"/> No parties other than the jurisdiction identified in [A] above.
<b>2. Formal Agreement Among Parties</b>	Is there a formal agreement among parties with regard to the <b>proposed project</b> ? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is a copy attached to this application? <input type="checkbox"/> Yes <input type="checkbox"/> No Is there a formal agreement among parties with regard to the <b>shared use of the facility</b> ? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is a copy attached to this application? <input type="checkbox"/> Yes <input type="checkbox"/> No

{ Reproduce and complete as many additional blocs as may be necessary for complete disclosure. }

<b>2a. Complete one each for ALL other Parties of Interest</b>	Number <input type="text"/> of a total of <input type="text"/> parties to proposed project (Count the LEAD Locality as #1, thereby start with #2.)	
<b>2b. Title of Jurisdiction</b>  (Check <input checked="" type="checkbox"/> only one, then make entry.)	<input type="text"/> <input type="text"/> <input type="text"/>	County of _____ City of _____ Incorporated Town of _____
<b>2c. Employer Identification Number (EIN)</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
<b>2d. Principal Point of Contact</b>	(Include salutation, name & title.)	
<b>2e. Mailing Address</b>  Identify COUNTY if appropriate →	(Include zip code+4)	
<b>2f. Telephone Number</b>	(     )	
<b>2g. FAX Number</b>	(     )	
<b>2h. Internet e-mail address</b>		

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**G. Electronic Transfer  
of Funds Information**

Note ☞ The completion of this section is optional at the time of application and will not hinder determination of eligibility, etc. However, if not provided and since funds will only be transferred electronically, disbursement will be delayed until this information is properly provided.

1. Account Ownership Information  
Employer Identification Number

5 4 - 6 0 0 1 1 3 1

SSN may NOT be substituted.

Complete next three (3) entries ONLY if Name is different than ACCOUNT TITLE as it appears in [E2].

NAME (Last, First, Initials) COUNTY OF AUGUSTA MASTER DEPOSITORY  
(Telephone Number)  
MAIN 540-245-5660  
(Telephone Number)  
ALTERNATE \_\_\_\_\_

2. Direct Deposit Account Information  
(Check ☒ one Type of Account)

☒ Checking ☐ Savings

(9 digits)  
ROUTING TRANSIT NUMBER 05140464  
ACCOUNT NUMBER 70005210  
ACCOUNT TITLE COUNTY OF AUGUSTA MASTER DEPOSITORY  
FINANCIAL INSTITUTION FIRST BANK | TRUST

Department of Fire Programs

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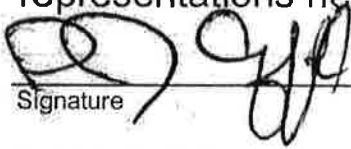
Note - This section of the application MUST be properly executed for the application to be complete. Certification may be completed by:

- City Manager /or/ Deputy
- County Administrator /or/ Deputy
- Town Manager /or/ Mayor
- Or other duly authorized official but only when the application is accompanied by a copy of an 'Ordinance' or other formal instrument clearly granting that party such authority.

*Only completed applications can be acted upon.*

## CERTIFICATION

This application is made on behalf of the jurisdiction above described [ A ] with the full knowledge and belief that all representations herein made are true and correct.



Signature

12/30/13

Date

Patrick Coffield

Printed Name

County Administrator

Title

(All applications must be notarized to be considered - incomplete forms shall be returned.)

State of Virginia }

City / County of Augusta }

On this 30 day of Dec (month) in 2013 (year), before me, the undersigned a Notary Public for the Commonwealth of Virginia, personally appeared Patrick Coffield to me known ( or to me proved ) to be the identical person named herein and having in my presence executed the above, and acknowledged that he executed same as his voluntary act and deed.

My Commission Expires:

10/31/17

Date

Carol Satterwhite

Notary Public

Department of Fire Programs

{Seal}



JAN 03 2013



2014 VDFP Burn Building Grant Repair/Renovation Budget Worksheet		
Report Item Number	Description	Cost of Repair
1 and 5	Cracked Padgenite and extend ceilings	\$57,346.00
2 and 7	Repair Concrete in building and Vertical face	\$8,500.00
3	Replace roofing materials with fire retardant treated materials	\$22,031.00
4	Replace rusted anchor bolt	\$113.00
6	Replace window handle	\$31.00
9	Addition of central data recorder using existing thermocouplings	\$3,081.00
10	New Signage with correct verbiage	\$1,000.00
11	Replace ship ladder from top of tower to roof	\$4,298.00
	Total	\$96,400.00

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**S & A SCHNITZHOFFER & ASSOCIATES, LLC.**  
**CONSULTING STRUCTURAL ENGINEERS**  
110 WEST JOHNSON STREET SUITE #232 STAUNTON, VA 24401

THINK .: DESIGN .: BUILD

**AUGUSTA COUNTY FIRE TRAINING SIMULATOR EVALUATION**

**180 TECHNOLOGY DRIVE - AUGUSTA COUNTY, VA**

**REPORT ISSUE DATE:** 12.23.2013  
**PROJECT NAME:** AUGUSTA COUNTY FIRE TRAINING TOWER  
**S&A PROJECT ID:** 13-151  
**INSPECTION DATE:** 12.11.2013  
**PRESENT:** JAMES R. SCHNITZHOFFER, P.E.  
CHRIS SHAVER  
**REGARDING:** STRUCTURAL EVALUATION

Dear Chris:

Per your request, a licensed structural engineer from Schnitzhofer & Associates, LLC (S&A) visited the project site located at the above listed address on December 11, 2013. Per our email correspondence with you prior to the site visit, we understand that there is concern regarding the structural adequacy of the in-place fire training tower. Specifically, we understand that your fire training tower has been inspected by an independent structural engineering firm, and that the findings outlined within their report may suggest that there are structural deficiencies within the structure. Furthermore, we understand you are requesting that S&A complete a site visit/visual evaluation at the physical structure and provide a structural evaluation letter outlining our opinion regarding the structural adequacy of the fire training tower. During the site visit, our representative conducted a visual assessment of the exposed interior and exterior framing conditions, in the interest of evaluating the structure. Based upon our site visit and review of the project documents, we offer the following:

**PROJECT DOCUMENTS**

1. Foundation & Design Calculations: Christopher E. Orlando, Dec 1, 2006.
2. Design Calculation Index: Christopher E. Orlando, 12/12/06.
3. Structural Drawings S0, S1 & S2: Christopher E. Orlando, Nov 30, 2006.
4. "For Construction" Documents: Christopher E. Orlando, 12/12/06.
5. "Summary of Deficiencies": The Structures Group

**SCHNITZHOFFER & ASSOCIATES, LLC - CONSULTING STRUCTURAL ENGINEERS**  
110 WEST JOHNSON STREET SUITE #232 STAUNTON, VA 24401  
P. 540.448.8321 F. 866.875.6409  
SCHNITZHOFFERANDASSOC.COM

## **STRUCTURAL REVIEW ITEMS**

1. Spalling and Cracking Concrete
  - a. Concrete Curb
  - b. Elevated Slabs
  - c. Grade Supported Slabs
2. Concrete Pedestal at Exterior Balcony Post
3. Anchor Bolt Connections at Cold Formed Metal Stud Columns

## **OBSERVATIONS & FINDINGS**

### **1. Spalling and Cracking Concrete**

- a. Concrete Curb: Spalling, cracking, deterioration, settlement, or damage of any type was not visibly evident at any location along the perimeter "concrete curb" of the subject structure during the time of the site visit (See Figure 1). Furthermore, based upon our review of the structural document Sheet S0, "General Notes and Details" by Behlen Industries, LP, dated Nov 30, 2006, concrete exposed to exterior elements shall be air entrained. Therefore, it is our opinion that the in-place concrete is properly specified to resist freeze thaw damage. Additionally, per Sheet S0 "General Notes and Details", the concrete cover requirements per 4G appear to adequately protect the reinforcing steel within the wall. Based upon our review of the above listed documents, it is the opinion of Schnitzhofer & Associates, LLC that the in place perimeter "concrete curb" is not experiencing visible damage, is properly specified within the signed and sealed "General Notes" for this project, and shall not be in need of structural repair and/or reinforcement at this time.
- b. Elevated Slabs: The in place elevated concrete slabs are experiencing minor cracking, visible at the walking surface, at various locations within the building (See Figure 2). Based upon our visual evaluation of the existing floor cracks, in addition to our cursory review of the "For Construction" documents, it is the opinion of Schnitzhofer & Associates, LLC that, combined with basic understanding of the principles behind the design of the concrete-over-metal-deck system used, the cracks within the elevated slab are a result of anticipated expansion and/or contraction within the slab, are not structural in nature, are propagating and located in close proximity to where we would anticipate them, and do not represent a structural deficiency within the

elevated slab with regards to the ability of the slab to safely support the anticipated loads expected for the subject structure.

- c. Grade Supported Slab: The in place grade supported slabs (interior and exterior) are experiencing minor cracking, visible at the walking surface, at various locations within or around the building footprint (See Figure 3). Based upon our visual evaluation of the existing concrete cracks, it is the opinion of Schnitzhofer & Associates, LLC that, combined with our visual site evaluation and cursory study of the project specifications, the cracks within the slabs are a result of anticipated expansion and/or contraction within the slabs, are not structural in nature, are propagating and located in close proximity to where we would anticipate them, and do not represent a structural deficiency within the slabs with regards to the ability of the slab to safely support the anticipated loads expected for the subject structure.

## 2. Concrete Pedestal at Exterior Balcony Post

The in place concrete pedestal supporting the galvanized steel balcony post at the east façade is experiencing minor cracking below one anchor rod (See Figure 4). Based upon the anchor rod size, location, quantity and 11.5" embedment (Per 4/S2), it is the opinion of Schnitzhofer & Associates, LLC that the steel column and anchor rods will perform in a safe and effective manner under the loading conditions anticipated for a balcony structure of this type. Furthermore, it is our opinion that the cracked concrete pier/pedestal at this location is not in need of removal and/or replacement.

## 3. Anchor Bolt Connections at Cold Formed Metal Stud Columns

The in place steel anchor bolts, washers and nuts located at the connection of the cold-formed metal stud column to the foundation are experiencing medium to severe corrosion at various locations (See Figure 5). Based upon our visible evaluation of the corroded anchor rods, we recommend that these anchors be mechanically cleaned to allow for further visual assessment. Upon determination that the anchors corroded are in excess of what is structurally acceptable, it is the recommendation of Schnitzhofer & Associates, LLC that the damaged anchor bolts, washers and nuts be repaired or reinforced as determined by a structural engineer licensed in the Commonwealth of Virginia.

### LIMITATIONS

While Schnitzhofer & Associates, LLC has completed a structural evaluation of the above listed items, we were unable to evaluate, in any way, the existing framing, foundation and soil composition, or the building conditions that were not visible during the time of the site visit, or specifically listed within the scope of this report.

Schnitzhofer & Associates, LLC is pleased to provide this structural evaluation report with regards to your Augusta County Fire Training Simulator in Augusta County, VA. Please contact me directly at 448.8321 with any questions.

Sincerely,



James Ray Schnitzhofer P.E.  
President



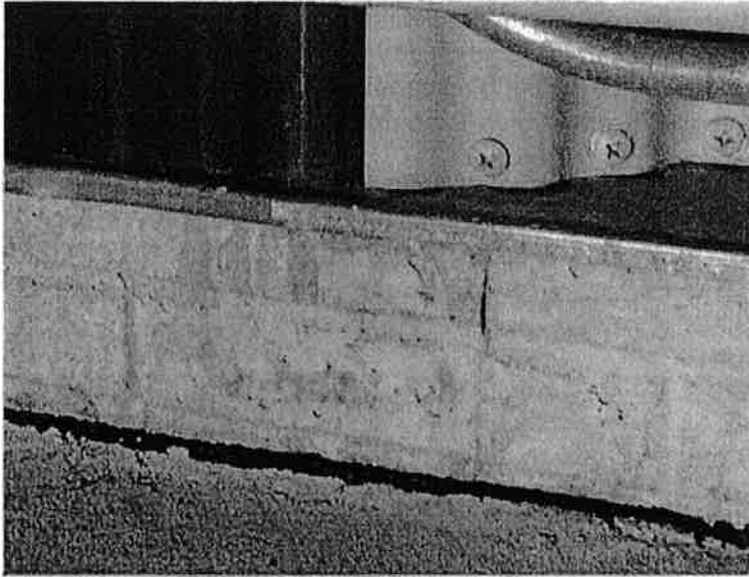
**SCHNITZHOFFER & ASSOCIATES, LLC - CONSULTING STRUCTURAL ENGINEERS**

110 WEST JOHNSON STREET SUITE #232 STAUNTON, VA 24401

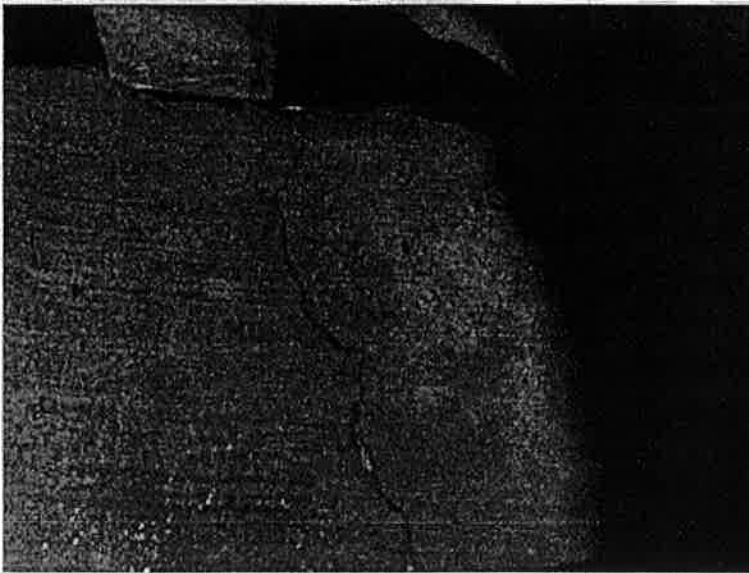
P. 540.448.8321 F. 866.875.6409

[SCHNITZHOFFERANDASSOC.COM](http://SCHNITZHOFFERANDASSOC.COM)

**APPENDIX**



**Figure 1:** Concrete Curb at Building Perimeter Base.



**Figure 2:** Expansion/Contraction Cracks at Elevated Concrete Deck.

**SCHNITZHOFFER & ASSOCIATES, LLC - CONSULTING STRUCTURAL ENGINEERS**

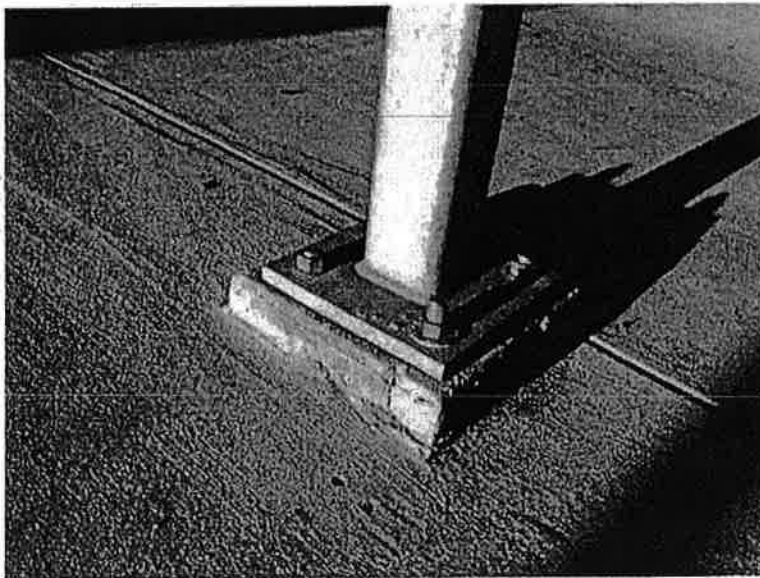
110 WEST JOHNSON STREET SUITE #232 STAUNTON, VA 24401

P. 540.448.8321 F. 866.875.6409

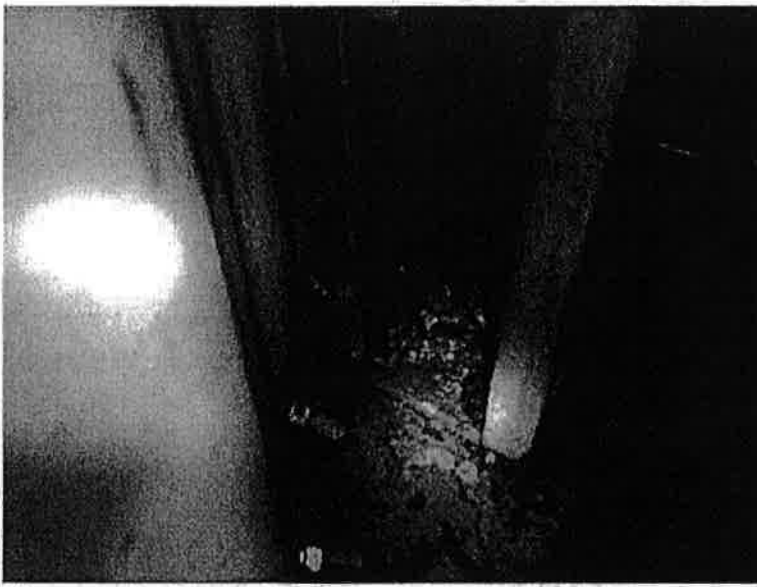
[SCHNITZHOFFERANDASSOC.COM](http://SCHNITZHOFFERANDASSOC.COM)



**Figure 3:** Concrete Grade-Supported Slab.

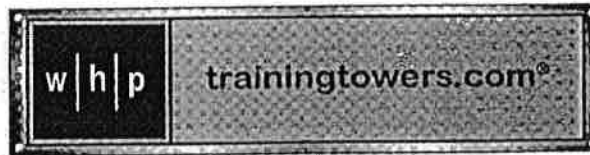


**Figure 4:** Concrete Pedestal at Exterior Balcony Post.



**Figure 5:** Anchor Rods at Cold-Formed Steel Columns





March 18, 2013

Q13-108

Augusta County Fire and Rescue  
Chris Shaver, BS  
Captain/EMT-I  
18 Government Center Lane  
Verona, VA 24482

Phone: 540-245-5624 Ext-6  
Email: [cshaver@co.augusta.va.us](mailto:cshaver@co.augusta.va.us)

Re: Repair Proposal for Training Facility

Dear Captain Shaver,

We are pleased to provide you with the following proposal for repairs and upgrades of your burn building. WHP Trainingtowers will provide all materials, freight, labor, tools and equipment necessary for the proper completion of the repairs and upgrades. The repairs and upgrades would consist of the following:

- Tighten and adjust all door and shutter hardware. Replace burn room interior handle. **\$507.00**
- Replace 3'x4' Super Padgenite on burn room #2 window shutter. **\$499.00**
- Replace One (1) burn room door slab. **\$1,152.00**
- Prep and paint rusted areas of roof trusses. **\$740.00**
- Extend ceilings in Burn Room 1&3. **\$51,183.00**
- Reset Standpipe. **\$248.00**
- Repair roof-chain gate. **\$164.00**
- Reseal guard rail mounting bolts. **\$658.00**
- Install garage door flashing. **\$491.00**

**A one-time trip charge of \$2,809.00 will apply.**

All pricing is in US Dollars and is valid for 30 days.

**Exclusions:** We exclude from our proposal: taxes, permits, special insurance requirements if any, mechanical, electrical, dumpster, and general condition items and any other miscellaneous fees.

**Schedule:** Our schedule will be 2 weeks to prepare shop drawings. 2-3 weeks to assemble parts. 1 week for delivery to site. 6-8 days for installation.

**Terms:** Net 30. A deposit of 25% on materials is due on receipt of order (signing of contract). Balance of payment on materials due on delivery to site. No retention on materials. Labor will be billed monthly. Invoices not in dispute over 30 days will be assessed 1 ½ % per month on balances in excess of 30 days.

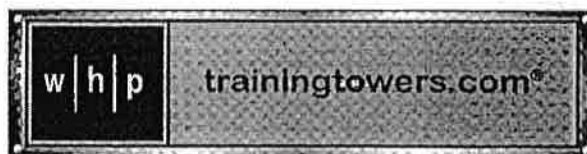
We hope you find the proposal acceptable. If we can provide you with further information please feel free to call.

Sincerely,

*Bob Pottberg*

Bob Pottberg  
WHP Trainingtowers  
800-351-2525

Cc: Jim Eicholtz



November 7, 2013

Q13-405

Augusta County Fire and Rescue  
Chris Shaver, BS  
Captain/EMT-I  
18 Government Center Lane  
Verona, VA 24482

Phone: 540-245-5624 Ext-6  
Email: [cshaver@co.augusta.va.us](mailto:cshaver@co.augusta.va.us)

Re: Repair Proposal for Training Facility

Dear Captain Shaver,

We are pleased to provide you with the following proposal for repairs and upgrades of your burn building. WHP Trainingtowers will provide all materials, freight, labor, tools and equipment necessary for the proper completion of the repairs and upgrades. The repairs and upgrades would consist of the following:

- Remove existing railing, shingles, trim, flashing and plywood from gabled roof and install 18ga galvanized "A" deck, trim, flashing and railing. Materials, Freight and Labor (Item #3) **\$22,031.00**
- Install Super Padgenite HD outside five (5) interior doors and outside two (2) windows. Materials, Freight and Labor (Item #5) **\$ 6,163.00**
- One (1) Interior "D" Handle. Materials only (Item #6) **\$ 5.00**
- One (1) Shutter Hold Open Device. Materials only **\$ 26.00**
- One (1) Movable Maze Turnbuckle Assembly. Materials only **\$ 113.00**
- One (1) Vertical Ladder (replacement for ships ladder) Materials, Freight and Labor **\$ 798.00**
- Extend ceilings in Burn Room 1&3. Materials, Freight and Labor **\$51,183.00**

**Any and all repairs must be done on same trip.**

All pricing is in US Dollars and is valid for 30 days.

**Exclusions:** We exclude from our proposal: taxes, permits, special insurance requirements if any, mechanical, electrical, dumpster, and general condition items and any other miscellaneous fees.

**Schedule:** Our schedule will be 2 weeks to prepare shop drawings. 2-3 weeks to assemble parts. 1 week for delivery to site. 6-8 days for installation.

**Terms:** Net 30. A deposit of 25% on materials is due on receipt of order (signing of contract). Balance of payment on materials due on delivery to site. No retention on materials. Labor will be billed monthly. Invoices not in dispute over 30 days will be assessed 1 ½ % per month on balances in excess of 30 days.

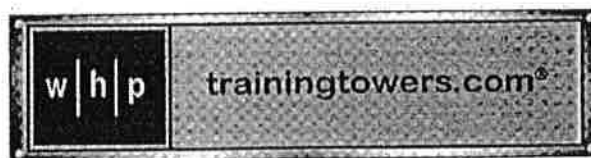
We hope you find the proposal acceptable. If we can provide you with further information please feel free to call.

Sincerely,

*Bob Pottberg*

Bob Pottberg  
WHP Trainingtowers  
800-351-2525

Cc: Jim Eicholtz



October 18, 2013

Q13-379

Augusta County Fire and Rescue  
Chris Shaver, BS  
Captain/EMT-I  
18 Government Center Lane  
Verona, VA 24482

Phone: 540-245-5624 Ext-6  
Email: [cshaver@co.augusta.va.us](mailto:cshaver@co.augusta.va.us)

Re: Temperature Monitoring Proposal for Training Facility

Dear Captain Shaver,

We are pleased to provide you with the following proposal for a new temperature monitoring device. WHP Trainingtowers will provide all materials, freight, labor, tools and equipment necessary for the proper completion of the repairs and upgrades. The repairs and upgrades would consist of the following:

<b>Option #1:</b> Wireless Temperature Monitoring without Laptop Computer	<b>\$2,328.00</b>
<b>Option #2:</b> Wireless Temperature Monitoring with Laptop Computer	<b>\$3,081.00</b>
<b>Option #3:</b> Audio/Visual Alarm system	<b>\$1,118.00</b>

Note: Existing thermocouples must be in working condition.

All pricing is in US Dollars and is valid for 30 days.

**Exclusions:** We exclude from our proposal: taxes, permits, special insurance requirements if any, mechanical, electrical, dumpster, and general condition items and any other miscellaneous fees.

**Schedule:** 2-3 weeks to assemble parts. 1 week for delivery.

**Terms:** Net 20. Invoices not in dispute over 30 days will be assessed 1 ½ % per month on balances in excess of 30 days.

We hope you find the proposal acceptable. If we can provide you with further information please feel free to call.

Sincerely,

*Bob Pottberg*

Bob Pottberg  
WHP Trainingtowers  
800-351-2525

Cc: Jim Eicholtz

